

POSITION

INITIALS

15 30

DATE

FEE DETERMINATION

O.I.P.E. CLASSIFIER

FORMALITY REVIEW

RESPONSE FORMALITY REVIEW

# INDEX OF CLAIMS

✓ ..... Rejected N  
 = ..... Allowed I  
 - (Through numeral) ..... Canceled A  
 : ..... Restricted C

Claim	Date
Final	
Original	
1	10/5
2	10/5
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Claim	Date
Final	
Original	
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If more than 150 claims or 10 actions  
 staple additional sheet here

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